## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned EP 16 AT 9: 28 submits for filing a certificate of Assumed Business Name:

submits for filing a certificate of Assumed Business	) thermo.
Please type or print legibly.  NOTE: See instructions on reverse before filing	g. SECRETARI OF SING STATE OF 10040
. The assumed business name which the undersign business is:	ned use(s) in the transaction of
2. The true name(s) and business address(es) of th	e entity or individual(s) doing
business under the assumed business name:	Complete Address
Name	8418 West La Jolla
Grandma's Care Home, Inc.	Boise ID 83709-5194
c 158764	
3. The general type of business transacted under the Retail Trade Transportation and	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
GCH Domestics, Inc.	PO Box 83720 Boise ID 83720-0080
8418 West La Jolla	208 334-2301
Boise ID 83709-5194	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	Secretary of State use only
Signature:	1DAHO SECRETARY OF STATE  9/16/2035 BH: 9119  CK: 1886 CT: 19235 BH: 9119
Printed Name: President	IDAHO SECRETARY OF STATE  99/16/2005 05:0  8
Capacity/Title: President (see instruction # 8 on back of form)	1 0 25.00 = 25.00 ASSUM MANE
(see instruction # o on back or form)	